## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000037597

Entity Name: LASALA'S DOJO SCHOOL OF MARTIAL ARTS, INC.

FILED Jan 17, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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600 ATLANTIC AVE 1200 OAK AVENUE FORT PIERCE, FL 34950 FORT PIERCE, FL 34982

Current Mailing Address: New Mailing Address:

1200 OAK AVE FORT PIERCE, FL 34982

FEI Number: 20-0934557 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LASALA, FRED JAMES

4608 SUNRISE BLVD

FT PIERCE, FL 34982 US

MARY SPAGNOLA-HILLS, ESQ.

1701 A1A

SUITE 102

VERO BEACH, FL 32963 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MARY M. SPAGNOLA-HILLS 01/17/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 ( ) Delete
 Title:
 P
 (X) Change ( ) Addition

 Name:
 LASALA, FRED JAMES
 Name:
 LASALA, FRED JAMES

 Address:
 4608 SUNRISE BLVD
 Address:
 1200 OAK AVENUE

 City-St-Zip:
 FT PIERCE, FL 34982
 FT PIERCE, FL 34982

 City-St-Zip:
 FT PIERCE, FL 34982
 City-St-Zip:
 FT PIERCE, FL 34982

 Title:
 V
 ( ) Delete
 Title:
 V
 ( X) Change ( ) Addition

 Name:
 LASALA, BONNIE
 Name:
 LASALA, BONNIE

 Address:
 4608 SUNRISE BLVD
 Address:
 1200 OAK AVENUE

 City-St-Zip:
 FT PIERCE, FL 34982
 City-St-Zip:
 FT PIERCE, FL 34982

Title: ( ) Delete Title: S ( ) Change (X) Addition

 Name:
 Name:
 LASALA, BONNIE

 Address:
 Address:
 1200 OAK AVENUE

 City-St-Zip:
 City-St-Zip:
 FORT PIERCE, FL 34982

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BONNIE LASALA V, S 01/17/2007